

12 DEC 10 AM 9:36

**FEC  
FORM 3**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Bill Nelson for US Senate

ADDRESS (number and street)

972 W. Whitmire Drive

☐ Check if different than previously reported. (ACC)

Melbourne

FL

32935

2. FEC IDENTIFICATION NUMBER ▼

C C00344051

CITY ▲  
3. IS THIS REPORT ☒ NEW (N) OR ☐ AMENDED (A)

STATE ▲

ZIP CODE ▲  
STATE ▼ DISTRICT  
FL 00

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)  
☐ July 15 Quarterly Report (Q2)  
☐ October 15 Quarterly Report (Q3)  
☐ January 31 Year-End Report (YE)

☐ Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)  
☐ Convention (12C) ☐ Special (12S)

Election on MM/DD/YYYY in the State of

(c) 30-Day POST-Election Report for the:

☒ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on MM/DD/YYYY in the State of FL

5. Covering Period.

MM/DD/YYYY  
10/18/2012

through

MM/DD/YYYY  
11/26/2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Peggy Gagnon

Signature of Treasurer Peggy Gagnon

Date

MM/DD/YYYY  
12/06/2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only

**FEC FORM 3**  
(Revised 02/2003)